2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065855

Entity Name: FLORIDIAN COMMUNITY HOLDINGS, INC.

FILED Mar 30, 2009 Secretary of State

Comment Brigain all Black of Brosinasa				New Principal Place of Business		
Current Principal Place of Business: New Principal Place of Business					or Business:	
5599 SOUTH UNIVERSITY DRIVE SUITE 100 DAVIE, FL 33328						
Current Mailing Address:				New Mailing Address:		
5599 SOUTH UNIVERSITY DRIVE SUITE100 DAVIE, FL 33328			5	5599 SOUTH UNIVERSITY DRIVE SUITE 100 DAVIE, FL 33328		
FEI Number: 2	20-1583805	FEI Number Applied For ()	FEI Numb	per Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
IGLER, GEORGE A 2457 CARE DRIVE TALLAHASSEE, FL 32308 US						
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.						
SIGNATURE:						
	Electronic	Signature of Registered Agent	t		Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () C COSTOYA, FRAN 5230 S UNIVERS DAVIE, FL 33328	CISCO ITY DRIVE, SUITE 103	N A	lītle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C ZINN, DAVID M 5599 SOUTH UNI DAVIE, FL 33328		N A	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D LEGGETT, JEFF 5599 SOUTH UNI DAVIE, FL 33328	VERSITY DRIVE	N #	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C ZUCKERMAN, AN 5599 SOUTH UNI DAVIE, FL 33328	VERSITY DRIVE	N A	Fitle: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D ZINN, WARREN; 5599 SOUTH UNI DAVIE, FL 33328		N A	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C MARZOUCA, JOS 102 SANTANDER JUPITER, FL 334	DRIVE	N #	Fitle: Name: Address: Dity-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ULISES I. ALONSO CFO 03/30/2009